

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

JB DDCM S/001/066 10/27/04

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Recipient's Name (Please Print Clearly) (to be completed by mailer)
HEATHER SCHOLZ, DAVE PENNEY - EARTH'S
 Street, Apt. No., or PO Box No.
PO BOX 1186
 City, State, Zip+4
BEAVER UT 84713

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
HEATHER SCHOLZ & DAVE PENNEY
PO BOX 1186
BEAVER UT 84713

2. Article Number
JB DDCM S/001/066 10/27/04

3. Service Type
 Certified Mail
 Registered
 Insured Mail
 Express Mail
 Return Receipt
 C.O.D.
 Restricted Delivery (Extra Fee)

4. Is delivery address different from item 1? If YES, enter delivery address below:

5. Signature
Heather Scholz

6. Received by (Print Name)
S. HEATHER SCHOLZ

COMPLETE THIS SECTION ON DELIVERY

7. Date Received
NOV 04 2004

8. Postmark
PROVO UT 84605 PM 2 23V

9. Sender: Please print your name, address, and ZIP+4 in this box.
Joelle Burns
State of Utah
Division of Oil, Gas and Mining
1594 West North Temple Suite 1210
Salt Lake City UT 84114-5801

10. Tracking Information
7099 3400 10016 8896 0501
PSI-Fdm 8811 AUGUST 2001
Domestic Return Receipt

First Class Mail
 Postage & Fees P
 USPS
 Permit No. G-10

1050 9988 0006 9700 4000 6607